SCHEDULE B (FEC Form 3)	Use seperate schedule(s) for each category of the Detailed Summary Page	-	FOR LINE NUMBER: PAGE 173 / 179	
ITEMIZED DISBURSEMENTS		(check only	17 18 19a 19b 20a 20b 20c X 21	
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee				
NAME OF COMMITTEE (In Full) Hoyer for Congress				
Full Name (Last, First, Middle Initial) A. HERSETH FOR CONGRESS Mailing Address PO Box 2009			Transaction ID: D12533 Date of Disbursement O 6 M / D 2 D / Y Y Y O O 6 Y	
City Sioux Falls	State Zip Code SD 57101		Amount of Each Disbursement this Period	
Purpose of Disbursement 2006 General Candidate Name		Catagory	Refund or Disposal of Excess Contributions Required Under	
Stephanie Herseth Office Sought: X House Disburs Senate President	ement For: 2006 Primary X General Other (specify)	Category/ Type	11 C.F.R. 400.53	
State: SD District: 00 Full Name (Last, First, Middle Initial) HOOLEY FOR CONGRESS Mailing Address PO BOX 2050			Transaction ID: D12534 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City SALEM Purpose of Disbursement General 2006	State Zip Code OR 97308		Amount of Each Disbursement this Period 2000.00 Refund or Disposal of Excess	
Candidate Name Darlene Hooley	ement For: 2006 Primary X General Other (specify)	Category/ Type	Contributions Required Under 11 C.F.R. 400.53	
Full Name (Last, First, Middle Initial) C. Jill Derby for Congress			Transaction ID: D12603 Date of Disbursement	
Mailing Address PO Box 1901			$\begin{bmatrix} \begin{smallmatrix} M & 6 & M \\ 0 & 6 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$	
City Minden	State Zip Code NV 89423		Amount of Each Disbursement this Period	
Purpose of Disbursement 2006 Primary Contribution Candidate Name Jill Derby		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
3 7	ement For: 2006 (Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)			6000.00	

TOTAL This Period (last page this line number only)